

**FLORIDA DEPARTMENT OF STATE DIVISION OF ELECTIONS  
CAMPAIGN TREASURER'S REPORT SUMMARY**

(1) Barbara T. Scott  
**Name**  
 (2) 22430 Albany Ave  
**Address (number and street)**  
Port Charlotte,, FL 33952  
**City, State, Zip Code**

**OFFICE USE ONLY**  
**ONLINE SUBMISSION**  
 [1051301]  
 Submitted on:  
 1/7/2013 16:47:37 (eastern)

**CHECK IF ADDRESS HAS CHANGED** (3) ID Number: 313

(4) **Check appropriate box(es):**  
 Candidate (office sought): Clerk Of The Circuit Court  
 Political Committee  **CHECK IF PC HAS DISBANDED**  
 Committee of Continuous Existence  **CHECK IF CCE HAS DISBANDED**  
 Party Executive Committee  **CHECK IF NO OTHER ELECTIONEERING COMMUNICATION REPORTS WILL BE FILED**  
 **Electioneering Communication**

**(5) REPORT IDENTIFIERS**

Cover Period: From 11/2/2012 To 2/4/2013 Report Type TRGEN  
 Original  Amendment  Special Election Report  Independent Expenditure Report

**(6) CONTRIBUTIONS THIS REPORT**

Cash & Checks	\$	<u>0.00</u>
Loans	\$	<u>0.00</u>
Total Monetary	\$	<u>0.00</u>
In-Kind	\$	<u>0.00</u>

**(7) EXPENDITURES THIS REPORT**

Monetary Expenditures	\$	<u>8,281.69</u>
Transfers to Office Account	\$	<u>0.00</u>
Total Monetary	\$	<u>8,281.69</u>

**(8) Other Distributions**  
 \$ 0.00

**(9) TOTAL Monetary Contributions To Date**  
 \$ 30,295.00

**(10) TOTAL Monetary Expenditures To Date**  
 \$ 30,295.00

**(11) CERTIFICATION**

**It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)**

I certify that I have examined this report and it is true, correct, and complete.  (Type name) _____ <input type="checkbox"/> Individual (only for electioneering commun.) <input type="checkbox"/> Treasurer <input type="checkbox"/> Deputy Treasurer <b>X</b> _____ Signature	I certify that I have examined this report and it is true, correct, and complete.  (Type name) _____ <input type="checkbox"/> Candidate <input type="checkbox"/> Chairperson (only for PC, PTY & electioneering commun. organization) <b>X</b> _____ Signature
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## CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Barbara T. Scott (2) I.D. Number 313

11/2/2012 through 2/4/2013

(3) Cover Period    /    /    through    /    /    (4) Page 1 of 0

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Contributor Type      Occupation		(9) Contribution Type	(10) In-kind Description	(11) Amendment	(12) Amount
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**CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES**

(1) Name Barbara T. Scott

(2) I.D. Number 313

(3) Cover Period 11/2/2012 through 2/4/2013

(4) Page 1 of 1

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
(6) Sequence Number					
11/6/2012 //	Laishley Crab House, 100 E. Retta Esplandade Punta Gorda, Fl 33950	election watch party	MO		\$2,500.00
1					
12/27/2012 //	CC HOMELESS COALITION, P.O. BOX 380157 MURDOCK, FL 33938	donation to close account.	MO		\$1,000.00
2					
12/27/2012 //	SALVATION ARMY, P.O. BOX 495126 PT. CHARLOTTE, FL 33949	donation to close account.	MO		\$1,000.00
3					
12/27/2012 //	C.A.R.E., P.O. BOX 510234 PUNTA GORDA, FL 33951	donation to close account.	MO		\$1,000.00
4					
12/27/2012 //	ANIMAL WELFARE LEAGUE, 3519 DRANCE STEET PT. CHARLOTTE, FL 33980	donation to close account.	MO		\$1,781.69
5					
12/27/2012 //	ARTS&HUMANITES, 2702 TAMIAMI TRAIL PT. CHARLOTTE, FL 33952	donation to close account.	MO		\$500.00
6					
12/27/2012 //	MILITARY HERITAGE MUSEUM, 1200 W. RETTA ESPLANADE PUNTA GORDA, FL 33950	donation to close account.	MO		\$500.00
7					
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